

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Mooney for Congress

ADDRESS (number and street)
▼

PO Box 1863

Check if different
than previously
reported. (ACC)

Martinsburg

WV

25402

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00506774

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

WV

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2015

through

M M / D D / Y Y Y Y
06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peter Onoszko

Signature of Treasurer

Peter Onoszko

[Electronically Filed]

Date

M M / D D / Y Y Y Y
01 / 13 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 98

Write or Type Committee Name

Mooney for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	188643.21	474465.69
(b) Total Contribution Refunds (from Line 20(d))	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	188643.21	474265.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	68189.89	244656.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	2104.18	2104.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	66085.71	242552.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	229095.06	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25934.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 98

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mooney for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

105218.00

250672.63

(ii) Unitemized.....

15675.21

43675.13

(iii) TOTAL of contributions from individuals ▶

120893.21

294347.76

(b) Political Party Committees.....

0.00

1700.00

(c) Other Political Committees (such as PACs).....

67750.00

178417.93

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

188643.21

474465.69

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

2104.18

2104.18

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

190747.39

476569.87

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 98

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	68189.89	244656.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	8600.00	8600.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	200.00
21. OTHER DISBURSEMENTS	0.00	5282.07
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	76789.89	258738.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	115137.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	190747.39
25. SUBTOTAL (add Line 23 and Line 24).....	305884.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	76789.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	229095.06

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

IDALIA PERALES ACOSTA

A.

Mailing Address 1546 EDINBORO DR

City

JONESBORO

State

GA

Zip Code

30236-5185

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		18		2015

Transaction ID : SA11.11064

Amount of Each Receipt this Period

225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

IDALIA PERALES ACOSTA

Mailing Address 1546 EDINBORO DR

City

JONESBORO

State

GA

Zip Code

30236-5185

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11142

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TODD ALTER Jr.

Mailing Address 730 Shireoaks Dr.

City

MARTINSBURG

State

WV

Zip Code

25403-1535

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiman Property Management LLC

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11.11299

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

675.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
Todd Alter Sr.Mailing Address **PO Box 1535**

City	State	Zip Code
Martinsburg	WV	25402

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : 12345

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JOSH BAILEYMailing Address **1271 CUMBERLAND RD**

City	State	Zip Code
ATLANTA	GA	30306-2219

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

SRG

DIRECTOR OF ACCOUNTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2015

Transaction ID : SA11.10993

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSH BAILEYMailing Address **1271 CUMBERLAND RD**

City	State	Zip Code
ATLANTA	GA	30306-2219

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

SRG

DIRECTOR OF ACCOUNTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2015

Transaction ID : SA11.11063

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

450.00

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

GREGORY H. BALOTIN

Mailing Address 24640 HARBOUR VIEW DR

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11149

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

A.

Full Name (Last, First, Middle Initial)

KIMBERLY BELLISSIMOMailing Address 1155 15TH ST. NW,
SUITE 410

City

WASHINGTON

State

DC

Zip Code

20005-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer

BASE CONNECT

Occupation

MARKETING EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11.11310

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

YVONNE BERRY

Mailing Address 1019 VAN SICLEN AVE APT 5J

City

BROOKLYN

State

NY

Zip Code

11207-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11459

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
CAROLINE V. BOYLE

Mailing Address P.O. BOX 606

City	State	Zip Code
KINGWOOD	WV	26537-0606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preston Contractors

Occupation
Chief Financial Officer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11.11345

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDWARD PATRICK BOYLE II

Mailing Address RT. 26 SOUTH

City	State	Zip Code
KINGWOOD	WV	26537-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preston Contractors

Occupation
Vice President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11.11347

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDWARD PATRICK BOYLE II

Mailing Address RT. 26 SOUTH

City	State	Zip Code
KINGWOOD	WV	26537-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preston Contractors

Occupation
Vice President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.11444

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

RYAN BOYLE

Mailing Address PO BOX 606

City

KINGWOOD

State

WV

Zip Code

26537-0606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preston ContractorsOccupation
Purchasing Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11346

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TYLER BOYLE

Mailing Address 12 GREENTREE DR.

City

MORGANTOWN

State

WV

Zip Code

26508-8635

FEC ID number of contributing
federal political committee.

C

Name of Employer
ExecutiveOccupation
Preston Contractors

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11445

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM G. BOYLE

Mailing Address 217 SEEMONT DR.

City

KINGWOOD

State

WV

Zip Code

26537-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCI GROUPOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11344

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

DONALD L. BRAGUNIER

Mailing Address 12315 COUNTRY VIEW DR.

City

CLEAR SPRING

State

MD

Zip Code

21722-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRAGUNIER MASONRYOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11.11300

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CAROLE BROWN

Mailing Address 20 SPRING STREET

City

STAMFORD

State

CT

Zip Code

06901-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : SA11.10999

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELIZABETH BRYDEN

Mailing Address 1 W 67TH ST

City

NEW YORK

State

NY

Zip Code

10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
DANCER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : SA11.10996

Amount of Each Receipt this Period

205.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1705.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
ELIZABETH BRYDEN

Mailing Address 1 W 67TH ST

City	State	Zip Code
NEW YORK	NY	10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
DANCER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2845.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11365

Amount of Each Receipt this Period

305.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
BROOK H. BUNN

Mailing Address 910 NEWTON RD.

City	State	Zip Code
CHARLESTON	WV	25314-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2015

Transaction ID : SA11.11360

Amount of Each Receipt this Period

1200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
JAMES O. BUNN II

Mailing Address 910 NEWTON ROAD

City	State	Zip Code
CHARLESTON	WV	25314-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
COAL RIVER ENERGY LLCOccupation
MINING

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2015

Transaction ID : SA11.11274

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3005.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

BARRY BURCH

A.

Mailing Address 1614 HALAMA ST

City

KIHAI

State

HI

Zip Code

96753-8051

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FINANCE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11147

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL CALLEN

B.

Mailing Address 1420 WESTERN AVE

City

MORGANTOWN

State

WV

Zip Code

26505-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

MICHAEL J CALLEN CONSTRUCTION LLC

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11106

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL E. CARYL

C.

Mailing Address 210 N. GEORGIA AVE.

City

MARTINSBURG

State

WV

Zip Code

25401-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOWLES RICE LLP

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

544.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11.11327

Amount of Each Receipt this Period

44.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3144.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

WADE CASKEY SR.

Mailing Address 1569 NOTTINGHAM RD.

City

CHARLESTON

State

WV

Zip Code

25314-2454

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
TEACHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11.11148

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. STEPHEN CLOUSE

Mailing Address 43538 GOLDEN MEADOW CIRCLE

City

ASHBURN

State

VA

Zip Code

20147-5421

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPHEN CLOUSE & ASSOC., INC.Occupation
MARKETING CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		23		2015

Transaction ID : SA11.10994

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM PAUL COLE III

Mailing Address 404 OAKHURST AVE.

City

BLUEFIELD

State

WV

Zip Code

24701-4137

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV State SenateOccupation
Senate President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11.11452

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

THOMAS W. COLOMB**A.**

Mailing Address 1001 MARINA DR. APT. 613

City

QUINCY

State

MA

Zip Code

02171-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

MURPHY HESSE TOOMEY & LEHANE LLP

Occupation

ATTORNEY

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11439

Amount of Each Receipt this Period

1700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARY K. COLWELL**B.**

Mailing Address 140 MARICOPA CIR

City

ENON

State

OH

Zip Code

45323-1817

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11022

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN C. DAVISON**C.**

Mailing Address 1233 W. MOUNT ROYAL AVE.

City

BALTIMORE

State

MD

Zip Code

21217-4176

FEC ID number of contributing
federal political committee.

C

Name of Employer

MOUNT ROYAL MANAGEMENT COMPANY

Occupation

PARTNER

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11395

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2350.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ANDREW M. ELLIOT

Mailing Address 1542 BEDFORD RD.

City

CHARLESTON

State

WV

Zip Code

25314-1917

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11478

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FONDA ELLIOT

Mailing Address 1516 ROYAL OAKS RD.

City

CHARLESTON

State

WV

Zip Code

25314-1972

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2015

Transaction ID : SA11.11449

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GREG ELLIOT

Mailing Address 1101 JOHNSON RD.

City

CHARLESTON

State

WV

Zip Code

25314-2519

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Medical Facilities Mangement

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2015

Transaction ID : SA11.11441

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
JENNIFER ELLIOT

Mailing Address 1101 JOHNSON RD.

City CHARLESTON	State WV	Zip Code 25314-2519
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFFC
---	---

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		28		2015

Transaction ID : SA11.11447

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN ELLIOT

Mailing Address 1516 ROYAL OAKS RD.

City CHARLESTON	State WV	Zip Code 25314-1972
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFFC
---	---

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		28		2015

Transaction ID : SA11.11448

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SHANNON ELLIOT

Mailing Address 1542 BEDFORD RD.

City CHARLESTON	State WV	Zip Code 25314-1917
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFFC
---	---

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11477

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressA. Full Name (Last, First, Middle Initial)
MR. MARIO A. ESPOSITO

Mailing Address 25239 S. GREYHAWK COURT

City	State	Zip Code
CHANNAHON	IL	60410-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11340

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KAREN S. EVANS

Mailing Address 218 FIREFLY LANE

City	State	Zip Code
MARTINSBURG	WV	25403-1068

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
CONSULTANT(RETIRED FED)

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2015

Transaction ID : SA11.11269

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSE F. FANJUL

Mailing Address 1 N. CLEMATIS ST. STE. 200

City	State	Zip Code
WEST PALM BEACH	FL	33401-5551

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		09		2015

Transaction ID : SA11.11290

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

LAWRENCE FIELD

A.

Mailing Address 433 N CAMDEN DR, #820

City

BEVERLY HILLS

State

CA

Zip Code

90210-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer

NSB ASSOCIATES, INC.

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2015

Transaction ID : SA11.11272

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN FITZGERALD

B.

Mailing Address 11411 ROCKVILLE PIKE

City

N. BETHESDA

State

MD

Zip Code

20852-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer

JJF MANAGEMENT

Occupation

CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11.11032

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN FITZGERALD

C.

Mailing Address 11411 ROCKVILLE PIKE

City

N. BETHESDA

State

MD

Zip Code

20852-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer

JJF MANAGEMENT

Occupation

CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2015

Transaction ID : SA11.11324

Amount of Each Receipt this Period

700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JOHN FITZGERALD

Mailing Address 11411 ROCKVILLE PIKE

City

N. BETHESDA

State

MD

Zip Code

20852-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer
JJF MANAGEMENTOccupation
CHAIRMAN

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11383

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN FITZGERALD

Mailing Address 11411 ROCKVILLE PIKE

City

N. BETHESDA

State

MD

Zip Code

20852-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer
JJF MANAGEMENTOccupation
CHAIRMAN

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11.11521

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. PETER FITZGERALD

Mailing Address 1445-A LAUGHLIN AVENUE

City

MCLEAN

State

VA

Zip Code

22101-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHAINBRIDGE BANKOccupation
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2015

Transaction ID : SA11.11519

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
RONALD R. FOSTER

Mailing Address **PO BOX 467**

City **SCOTT DEPOT** State **WV** Zip Code **25560-0467**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FOSTER SUPPLY INC.** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2015

Transaction ID : SA11.11334

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSE FUENTES

Mailing Address **750 9TH ST. NW, STE. 750**

City **WASHINGTON** State **DC** Zip Code **20001-4589**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EASTPORT STRATEGIES LLC** Occupation **ATTORNEY**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2015

Transaction ID : SA11.11163

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BETTY GARDNER

Mailing Address **1572 GOODIN HOLLOW RD**

City **NOEL** State **MO** Zip Code **64854-7235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11.11049

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2550.00

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
BETTY GARDNER

A. Mailing Address 1572 GOODIN HOLLOW RD

City	State	Zip Code
NOEL	MO	64854-7235

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11128

Amount of Each Receipt this Period

210.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BLAIR M. GARDNER

Mailing Address 59 ABNEY CIRCLE

City	State	Zip Code
CHARLESTON	WV	25314-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACKSON KELLY PLLCOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11456

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ROBERT GARTHWAIT

Mailing Address PO BOX 1367

City	State	Zip Code
WATERBURY	CT	06721-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLY-DEL MFG. CO.Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11029

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

960.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

KENT GEORGE

Mailing Address PO BOX 8523

City

CHARLESTON

State

WV

Zip Code

25303-0523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Robinson and McElwee, PLLC

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2015

Transaction ID : SA11.11189

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. DIRK D. HAIRE

Mailing Address 3563 OLD TRAIL RD.

City

EDGEWATER

State

MD

Zip Code

21037-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer

FOX ROTHSCHILD, LLP

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		24		2015

Transaction ID : SA11.11357

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMAS HALLORAN

Mailing Address 2506 KANAWHA AVE SE

City

CHARLESTON

State

WV

Zip Code

25304-1026

FEC ID number of contributing
federal political committee.

C

Name of Employer

AQUA-CLEAR, INC.

Occupation

MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		25		2015

Transaction ID : SA11.11361

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
A. BOBBYE F. HARRIS

Mailing Address 135 WINDSOR DR.

City	State	Zip Code
CALHOUN	GA	30701-2055

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11338

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. MR. FRANK S. HARRINGTON

Mailing Address 2 DAVID LEE CT.

City	State	Zip Code
CATONSVILLE	MD	21228-5706

FEC ID number of contributing
federal political committee.

C

Name of Employer
NIHOccupation
MACHINIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11370

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C. MICHAEL HARVEY

Mailing Address 6004 PINNACLE VIEW

City	State	Zip Code
HURRICANE	WV	25526-7430

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRITON CONSTRUCTIONOccupation
CHIEF ESTIMATOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11460

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

780.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

BENNETT K. HATFIELD

Mailing Address PO BOX 2405

City

CHARLESTON

State

WV

Zip Code

25329-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2015

Transaction ID : SA11.11318

Amount of Each Receipt this Period

1600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT W. HELM

Mailing Address 12064 OPEN RUN RD

City

ELLCOTT CITY

State

MD

Zip Code

21042-6101

FEC ID number of contributing
federal political committee.

C

Name of Employer

DECHERT LLP

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11.11031

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. JANET HENDERSON

Mailing Address 4325 FEDERAL HILL ROAD

City

STREET

State

MD

Zip Code

21154-1124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2015

Transaction ID : SA11.11405

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. ROBERT HENDERSON

Mailing Address 4325 FEDERAL HILL ROAD

City

STREET

State

MD

Zip Code

21154-1124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NUTRAMAX LABORATORIES

Occupation

CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		09		2015

Transaction ID : SA11.11295

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ROBERT HENDERSON

Mailing Address 4325 FEDERAL HILL ROAD

City

STREET

State

MD

Zip Code

21154-1124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NUTRAMAX LABORATORIES

Occupation

CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11404

Amount of Each Receipt this Period

2200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN A. HENRY III

Mailing Address 3508 EUCLID AVE.

City

DALLAS

State

TX

Zip Code

75205-3214

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE INVESTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11378

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
TATNALL HILLMAN

Mailing Address **504 W BLEEKER ST**

City	State	Zip Code
ASPEN	CO	81611-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

05 / **26** / **2015**

Transaction ID : SA11.11271

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
SUSAN HIRSCHMANN

Mailing Address **4052 SEMINARY ROAD**

City	State	Zip Code
ALEXANDRIA	VA	22304-1646

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLIAMS & JENSEN

Occupation
PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

06 / **24** / **2015**

Transaction ID : SA11.11358

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
WILLIAM B. HOTALING

Mailing Address **125 QUASSAICK AVE**

City	State	Zip Code
NEW WINDSOR	NY	12553-6635

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

04 / **30** / **2015**

Transaction ID : SA11.11132

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

WILLIAM B. HOTALING

Mailing Address 125 QUASSAICK AVE

City

NEW WINDSOR

State

NY

Zip Code

12553-6635

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SA11.11493

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

REBECCA A. KEEVER-TAYLOR

Mailing Address 249 SAYRE LN

City

EVANS

State

WV

Zip Code

25241-8015

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

305.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2015

Transaction ID : SA11.11159

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

REBECCA A. KEEVER-TAYLOR

Mailing Address 249 SAYRE LN

City

EVANS

State

WV

Zip Code

25241-8015

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

305.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2015

Transaction ID : SA11.11262

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

625.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 98

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressA. Full Name (Last, First, Middle Initial)
REBECCA A. KEEVER-TAYLOR

Mailing Address 249 SAYRE LN

City	State	Zip Code
EVANS	WV	25241-8015

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11481

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS KNUTSON JR.

Mailing Address 52 CATERA CT.

City	State	Zip Code
MARTINSBURG	WV	25403-0894

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11390

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HERBERT ALAN LEVIN

Mailing Address 724 E GRINNELL DR.

City	State	Zip Code
BURBANK	CA	91501-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPARTMENT OF JUSTICEOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2015

Transaction ID : SA11.11247

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

405.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
HERBERT ALAN LEVIN

Mailing Address **724 E GRINNELL DR.**

City	State	Zip Code
BURBANK	CA	91501-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPARTMENT OF JUSTICE

Occupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2015

Transaction ID : **SA11.11454**

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
LOUIS WADE LINGER JR.

Mailing Address **1023 RIVERVIEW DR.**

City	State	Zip Code
FAIRMONT	WV	26554-8309

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : **SA11.11443**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ANGELO LUINA

Mailing Address **4380 VIREO AVE APT 31**

City	State	Zip Code
BRONX	NY	10470-2328

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : **SA11.11047**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

425.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

ANGELO LUINA**A.**

Mailing Address 4380 VIREO AVE APT 3I

City

BRONX

State

NY

Zip Code

10470-2328

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA11.11498

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAVID MCCAIN**B.**

Mailing Address 13223 FAIRFAX ROAD

City

HAGERSTOWN

State

MD

Zip Code

21742-2639

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELECTROMET CORPORATION

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11.11301

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN MCGINN**C.**

Mailing Address 7728 ROSEBERRY FARM DRIVE

City

MANASSAS

State

VA

Zip Code

20111-8231

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MANAGEMENT CONSULTING

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		17		2015

Transaction ID : SA11.11353

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

800.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
MARK MCGREGOR

Mailing Address 30 BALSOME CT.

City	State	Zip Code
CHARLES TOWN	WV	25414-

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIRGINIA REGIONAL TRANSITOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		29		2015

Transaction ID : SA11.11000

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ROBERT G. MCLUSKY

Mailing Address 1869 LOUDON HEIGHTS RD.

City	State	Zip Code
CHARLESTON	WV	25314-1564

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACKSON KELLYOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11457

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
JOHN M. MCMAHON

Mailing Address 4824 RUGBY AVE.

City	State	Zip Code
BETHESDA	MD	20814-3019

FEC ID number of contributing
federal political committee.

C

Name of Employer
MILLER AND LONG CO. INC.Occupation
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11433

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ROBERT A. MCMILLAN

Mailing Address 2332 TERRAPIN NECK RD.

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-4156

FEC ID number of contributing
federal political committee.

C

Name of Employer

JEFFERSON DISTRIBUTING CO

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11337

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LUCILLE W. MELLISH

Mailing Address 2241 WELLESLEY ST.

City

PALO ALTO

State

CA

Zip Code

94306-1361

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11048

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AL MOORE

Mailing Address 13197 MAPLE DR.

City

SAINT LOUIS

State

MO

Zip Code

63127-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer

MFD

Occupation

FOOD DIST.

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : SA11.11058

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JOHN FRANCIS MURPHY

Mailing Address 2181 JAMIESON AVE UNIT 610

City

ALEXANDRIA

State

VA

Zip Code

22314-5749

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11339

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROGER NICHOLSON

Mailing Address 1557 QUARRIER STREET

City

CHARLESTON

State

WV

Zip Code

25311-2407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stephoe & Johnson

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11.11320

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. PETER ONOSZKO

Mailing Address 13 AUBREY CT

City

CHARLES TOWN

State

WV

Zip Code

25414-3809

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11333

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ZACHARY PAULSEN

Mailing Address 711 CHALFONTE DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22305-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

AKIN GUMP

Occupation

SENIOR INTERNATIONAL POLICY ADVISOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11352

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PETER PLAMONDON

Mailing Address 13903 CARLSON FARM DR

City

GERMANTOWN

State

MD

Zip Code

20874-4481

FEC ID number of contributing
federal political committee.

C

Name of Employer

PLAMONDON COMPANY

Occupation

BOARD CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11.11325

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GEOFFREY POHANKA

Mailing Address 2120 POLO POINTE DR

City

VIENNA

State

VA

Zip Code

22181-2846

FEC ID number of contributing
federal political committee.

C

Name of Employer

POHANKA HONDA

Occupation

AUTO DEALER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : SA11.11052

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

GEOFFREY POHANKA

Mailing Address 2120 POLO POINTE DR

City

VIENNA

State

VA

Zip Code

22181-2846

FEC ID number of contributing
federal political committee.

C

Name of Employer
POHANKA HONDAOccupation
AUTO DEALER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2015

Transaction ID : SA11.11062

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MELODY POTTER

Mailing Address 105 NEWCOMER ROAD

City

SOUTH CHARLESTON

State

WV

Zip Code

25309-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRI-STAR COAL SALES COMPANYOccupation
SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		08		2015

Transaction ID : SA11.11279

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ERNIE RAFAILIDES

Mailing Address 17 W. PENNSYLVANIA AVE

City

TOWSON

State

MD

Zip Code

21204-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAYVIEW MANAGEMENTOccupation
PROPERTY MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11487

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
LEROY RASHID

Mailing Address 107 FOREST DR.

City	State	Zip Code
CHARLESTON	WV	25302-2603

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INFORMATION REQUESTED PER BEST EFF

Occupation
 INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.11190

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
TJ RODGERS

Mailing Address 575 EASTVIEW WAY

City	State	Zip Code
WOODSIDE	CA	94062-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CLOS DE LA TECH

Occupation
 WINEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 25 / 2015

Transaction ID : SA11.11362

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
VALETA RODGERS

Mailing Address 575 EASTVIEW WAY

City	State	Zip Code
WOODSIDE	CA	94062-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HOMEMAKER

Occupation
 HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 25 / 2015

Transaction ID : SA11.11520

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
NANCY B. ROTH

Mailing Address 8545 CARMEL VALLEY RD.

City	State	Zip Code
CARMEL	CA	93923-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.11218

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NANCY B. ROTH

Mailing Address 8545 CARMEL VALLEY RD.

City	State	Zip Code
CARMEL	CA	93923-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.11252

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NANCY B. ROTH

Mailing Address 8545 CARMEL VALLEY RD.

City	State	Zip Code
CARMEL	CA	93923-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 24 / 2015

Transaction ID : SA11.11489

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 38 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

SCOTT ROTRUCK

Mailing Address 912 SUNCREST PL.

City

MORGANTOWN

State

WV

Zip Code

26505-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11442

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES K. RULAND

Mailing Address PO BOX 790

City

CHARLES TOWN

State

WV

Zip Code

25414-0790

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAI PROPERTIES

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

544.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2015

Transaction ID : SA11.11315

Amount of Each Receipt this Period

44.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. DANIEL RUNDE

Mailing Address 6910 BONHEIM COURT

City

MCLEAN

State

VA

Zip Code

22101-5100

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTER FOR STRATEGIC AND INTL

Occupation

DIRECTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2015

Transaction ID : SA11.11273

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1294.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MRS. RUTH SACHER

Mailing Address P.O. BOX 7448

City

CAPISTRANO BEACH

State

CA

Zip Code

92624-7448

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11355

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. RUTH SACHER

Mailing Address P.O. BOX 7448

City

CAPISTRANO BEACH

State

CA

Zip Code

92624-7448

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11356

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PETER SHEAFFER

Mailing Address PO BOX 28

City

CENTREVILLE

State

MD

Zip Code

21617-0028

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11043

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5900.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 40 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

GAIL SHUMATE

Mailing Address 500 SPRING ST

City

SANTA CRUZ

State

CA

Zip Code

95060-2028

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11.11330

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

L. PENDLETON SIEGEL

Mailing Address 2230 W. RIVERSIDE, #101

City

SPOKANE

State

WA

Zip Code

99201-1442

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2015

Transaction ID : SA11.11288

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHRISTOPHER SLAUGHTER

Mailing Address 4129 CYPRESS CIR

City

CULLODEN

State

WV

Zip Code

25510-9428

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEPTOE & JOHNSON

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11.11316

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 41 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MARK SMITH

Mailing Address 5090 WARWICK TR

City

PITTSBURGH

State

PA

Zip Code

15213-3836

FEC ID number of contributing
federal political committee.

C

Name of Employer

OAKWOOD LABS

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : SA11.11470

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. TIMOTHY SMITH

Mailing Address 108 ROLLING RD

City

GAITHERSBURG

State

MD

Zip Code

20877-2044

FEC ID number of contributing
federal political committee.

C

Name of Employer

U.S. NAVY

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

Transaction ID : SA11.11177

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEE SNYDER

Mailing Address 270 INDUSTRIAL BLVD.

City

KEARNEYSVILLE

State

WV

Zip Code

25430-2774

FEC ID number of contributing
federal political committee.

C

Name of Employer

SNYDER ENVIROMENTAL

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2015

Transaction ID : SA11.11296

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

RICHARD TOPPING

Mailing Address 1 FOREST BROOK DR.

City

ELKINS

State

WV

Zip Code

26241-3391

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11408

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TIMOTHY B. WEBSTER

Mailing Address 1924 37TH ST. NW

City

WASHINGTON

State

DC

Zip Code

20007-2240

FEC ID number of contributing
federal political committee.

C

Name of Employer

BASE CONNECT

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : SA11.11298

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STANLEY H. WEINSTEIN

Mailing Address 3545 PINE TREE DR.

City

MIAMI BEACH

State

FL

Zip Code

33140-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

Transaction ID : SA11.11349

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
A. LOUIS WEISBERG

Mailing Address 3 CHATSWORTH LANE

City	State	Zip Code
CHARLESTON	WV	25314-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer
SERVICE WIREOccupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11.11396

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. KATHERINE WELLFORD

Mailing Address 1615 RIDGEVIEW RD.

City	State	Zip Code
CHARLESTON	WV	25314-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
N/A

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

Transaction ID : SA11.11164

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. JAMES WHANG

Mailing Address 11809 CENTURION WAY

City	State	Zip Code
POTOMAC	MD	20854-6419

FEC ID number of contributing
federal political committee.

C

Name of Employer
AEPLOG INCOccupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2015

Transaction ID : SA11.11297

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 98

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

BONNIE YOUNG

Mailing Address 2631 W. CASAS CIR.

City

TUCSON

State

AZ

Zip Code

85742-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11368

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ILIA ZAVIALOV

Mailing Address 12815 SE RIVERCREST

City

VANCOUVER

State

WA

Zip Code

98683-6623

FEC ID number of contributing
federal political committee.

C

Name of Employer

NOVA TECHNOLOGIES, INC.

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11046

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

105218.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
ANDY HARRIS FOR CONGRESS

Mailing Address PO BOX 604

City	State	Zip Code
BEL AIR	MD	21014-0604

FEC ID number of contributing federal political committee.

C C00435974

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.11471

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City	State	Zip Code
BOWLING GREEN	KY	42102-9639

FEC ID number of contributing federal political committee.

C C00445023

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

Transaction ID : SA11.11277

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HUDSON FOR CONGRESS

Mailing Address P.O. BOX 5053

City	State	Zip Code
CONCORD	NC	28027-1500

FEC ID number of contributing federal political committee.

C C00504522

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2015

Transaction ID : SA11.11188

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for CongressA. Full Name (Last, First, Middle Initial)
JIM JORDAN FOR CONGRESS

Mailing Address 1709 OH-560

City	State	Zip Code
URBANA	OH	43078-

FEC ID number of contributing
federal political committee.

C C00416594

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.11406

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PKWY, SUITE 206

City	State	Zip Code
METAIRIE	LA	70006-6532

FEC ID number of contributing
federal political committee.

C C00394957

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

Transaction ID : SA11.11276

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION CO

Mailing Address 1333 NEW HAMPSHIRE AVE NW

City	State	Zip Code
D.C.	DC	20036-1500

FEC ID number of contributing
federal political committee.

C C00104901

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2015

Transaction ID : SA11.11486

Amount of Each Receipt this Period

750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
ALPHA NATURAL RESOURCES PAC

Mailing Address 1301 PENNSYLVANIA AVE. NW
SUITE 404

City State Zip Code
WASHINGTON DC 20004-1730

FEC ID number of contributing federal political committee. **C** C00348524

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

M M / D D / Y Y Y Y
04 30 2015

Transaction ID : SA11.11028

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION CO

Mailing Address 101 3RD ST N

City State Zip Code
MOORHEAD MN 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 19 2015

Transaction ID : SA11.11428

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 10TH ST NW

City State Zip Code
D.C. DC 20001-5188

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 21 2015

Transaction ID : SA11.11168

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL AC

Mailing Address **P. O. DRAWER 938**

City State Zip Code
THIBODAUX LA 70302-0938

FEC ID number of contributing
federal political committee.

C C00081414

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

06 / 05 / 2015

Transaction ID : SA11.11432

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS & CONTRACTORS (ABC) PAC

Mailing Address **440 FIRST STREET, N.W. 2ND FLOOR**

City State Zip Code
WASHINGTON DC 20001-2028

FEC ID number of contributing
federal political committee.

C C00010421

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

06 / 11 / 2015

Transaction ID : SA11.11317

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BLOOMIN' BRANDS, INC. POLITICAL ACTION COMMITTEE

Mailing Address **2202 N WESTSHORE BLVD**

City State Zip Code
TAMPA FL 33607-5747

FEC ID number of contributing
federal political committee.

C C00253153

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

05 / 21 / 2015

Transaction ID : SA11.11204

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

8000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

COALPAC

Mailing Address 101 CONSTITUTION AVE. NW SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing
federal political committee.**C** C00109819

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

Transaction ID : SA11.11162

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAIRY FARMERS OF AMERICA, INC DEPAC

Mailing Address 10220 N. AMBASSADOR DR.

City

KANSAS CITY

State

MO

Zip Code

64153-1367

FEC ID number of contributing
federal political committee.**C** C00001388

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

Transaction ID : SA11.11275

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DEALERS ELECTION ACTION COMMITTEE

Mailing Address 412 FIRST STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-1804

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : SA11.11451

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

PAGE 50 OF 98

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

A. DUKE ENERGY CORPORATION PAC

Mailing Address 550 S TRYON ST

City

CHARLOTTE

State

NC

Zip Code

28202-4200

FEC ID number of contributing
federal political committee.
☒ C C00083535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		19		2015

Transaction ID : SA11.11491

Amount of Each Receipt this Period

 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. EAGLE FORUM PAC

Mailing Address PO BOX 618

City

ALTON

State

IL

Zip Code

62002-0618

FEC ID number of contributing
federal political committee.
☒ C C00103937

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		05		2015

Transaction ID : SA11.11430

Amount of Each Receipt this Period

 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS

Mailing Address 300 NEW JERSEY AVE NW

City

D.C.

State

DC

Zip Code

20001-2030

FEC ID number of contributing
federal political committee.
☒ C C00365072

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2015

Transaction ID : SA11.11485

Amount of Each Receipt this Period

 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

 4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

FREEDOM AND SECURITY PAC

Mailing Address 228 S. WASHINGTON ST. STE. 115

City	State	Zip Code
ALEXANDRIA	VA	22314-5404

FEC ID number of contributing federal political committee.

C C00437061

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.11407

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE NW

City	State	Zip Code
D.C.	DC	20001-2133

FEC ID number of contributing federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2917.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.11410

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HSP DIRECT LLC PAC HSP PAC

Mailing Address 13755 SUNRISE VALLEY DRIVE STE 450

City	State	Zip Code
HERNDON	VA	20171-4682

FEC ID number of contributing federal political committee.

C C00432419

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11.11458

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL A

Mailing Address 2121 CRYSTAL DR

City

ARLINGTON

State

VA

Zip Code

22202-3706

FEC ID number of contributing
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

Transaction ID : SA11.11375

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARKETPLACE IDEAS AND CONSERVATIVE KNOWLEDGE PAC MICK PAC

Mailing Address 228 S. WASHINGTON ST. STE. 115

City

ALEXANDRIA

State

VA

Zip Code

22314-5404

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		15		2015

Transaction ID : SA11.11517

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION CO

Mailing Address 2600 S EUCLID AVE

City

BAY CITY

State

MI

Zip Code

48706-3414

FEC ID number of contributing
federal political committee.**C** C00384354

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		24		2015

Transaction ID : SA11.11516

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

 Full Name (Last, First, Middle Initial)
A. NATIONAL ATHLETIC TRAINERS' ASSOCIATION INC POLITI

Mailing Address 1620 VALWOOD PKWY, SUITE 115

City	State	Zip Code
CARROLLTON	TX	75006-8321

FEC ID number of contributing federal political committee.

C C00408518

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		30		2015

Transaction ID : SA11.11025

Amount of Each Receipt this Period

500.00

CONTRIBUTION

 Full Name (Last, First, Middle Initial)
B. NATIONAL EMERGENCY MEDICINE PAC

Mailing Address PO BOX 619911

City	State	Zip Code
DALLAS	TX	75261-9911

FEC ID number of contributing federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2015

Transaction ID : SA11.11479

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

 Full Name (Last, First, Middle Initial)
C. NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICA
Mailing Address 400 N. CAPITOL STREET NW
SUITE 490

City	State	Zip Code
WASHINGTON	DC	20001-6509

FEC ID number of contributing federal political committee.

C C00480863

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		22		2015

Transaction ID : SA11.11483

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

PROSPERITY ACTION, INC.

A.

Mailing Address 1006 PENDLETON ST.

City

ALEXANDRIA

State

VA

Zip Code

22314-1837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2015

Transaction ID : SA11.11484

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE;

Mailing Address P. O. BOX 718

City

WINSTON SALEM

State

NC

Zip Code

27102-0718

FEC ID number of contributing
federal political committee.

C C00042002

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.11372

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C.

RITE AID CORPORATION PAC

Mailing Address 30 HUNTER LN

City

CAMP HILL

State

PA

Zip Code

17011-2400

FEC ID number of contributing
federal political committee.

C C00104083

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2015

Transaction ID : SA11.11211

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
SANTA YNEZ BAND OF CHUMASH INDIANS

Mailing Address P O BOX 517

City	State	Zip Code
SANTA YNEZ	CA	93460-0517

FEC ID number of contributing federal political committee. **C** C90009630

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2015

Transaction ID : SA11.11161

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SARAH PAC

Mailing Address PO BOX 7711

City	State	Zip Code
ARLINGTON	VA	22207-0711

FEC ID number of contributing federal political committee. **C** C00458588

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.11469

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SNAKE RIVER SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1951 SATURN RD

City	State	Zip Code
BOISE	ID	83709-2900

FEC ID number of contributing federal political committee. **C** C00326389

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11.11515

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

THE PROCTER & GAMBLE COMPANY GOOD GOVERNMENT FUND

Mailing Address 1 PROCTER & GAMBLE PLAZA

City
CINCINNATI

State
OH

Zip Code
45202-3315

FEC ID number of contributing
federal political committee.

C C00257329

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2015

Transaction ID : SA11.11278

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THE PROCTER & GAMBLE COMPANY GOOD GOVERNMENT FUND

Mailing Address 1 PROCTER & GAMBLE PLAZA

City
CINCINNATI

State
OH

Zip Code
45202-3315

FEC ID number of contributing
federal political committee.

C C00257329

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11.11490

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

VALERO PAC

Mailing Address P.O. BOX 696000

City
SAN ANTONIO

State
TX

Zip Code
78269-6000

FEC ID number of contributing
federal political committee.

C C00109546

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SA11.11429

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

VIKING LEADERSHIP PAC

A.

Mailing Address PO BOX 4616

City

SAINT PAUL

State

MN

Zip Code

55101-4616

FEC ID number of contributing
federal political committee.

C C00565036

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Transaction ID : SA11.11518

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

VOICE FOR FREEDOM PAC

B.

Mailing Address 2700 CUMBERLAND PKWY STE. 150

City

ATLANTA

State

GA

Zip Code

30339-3321

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2015

Transaction ID : SA11.11181

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

67750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 OF 98

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
Strategic Media Placement

Mailing Address 7669 Stagers Loop

City	State	Zip Code
Deleware	OH	43015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2015

Transaction ID : 1

Amount of Each Receipt this Period

2104.18

Reimbursement

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2104.18

2104.18

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. JESSICA CARTER

Mailing Address 303 SHAWNEE CIRCLE

City	State	Zip Code
CHARLESTON	WV	25304

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 08 / 2015

Amount of Each Disbursement this Period

3706.91

Transaction ID : SB17.I922

B. JESSICA CARTER

Mailing Address 303 SHAWNEE CIRCLE

City	State	Zip Code
CHARLESTON	WV	25304

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 04 / 2015

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.I945

C. JESSICA CARTER

Mailing Address 303 SHAWNEE CIRCLE

City	State	Zip Code
CHARLESTON	WV	25304

Purpose of Disbursement
FUNDRAISING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 22 / 2015

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB17.I958

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8406.91

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. BRIAN CHATWIN

Mailing Address 6608 INDEPENDENCE AVE.

City	State	Zip Code
SPRINGFIELD	VA	22151

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 08 / 2015

Amount of Each Disbursement this Period

5650.00

Transaction ID : SB17.I919

B. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 08 / 2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I924

C. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 30 / 2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I929

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6650.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I940

B. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 29 / 2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I944

C. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I954

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AMY SHUSTER

Mailing Address 135 EAST CLEMENT STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2015

City	State	Zip Code
BALTIMORE	MD	21230

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
FUNDRAISING PHONE CALLSCategory/
Type

Transaction ID : SB17.I921

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. AMY SHUSTER

Mailing Address 135 EAST CLEMENT STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2015

City	State	Zip Code
BALTIMORE	MD	21230

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
FUNDRAISING PHONE CALLSCategory/
Type

Transaction ID : SB17.I939

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. AMY SHUSTER

Mailing Address 135 EAST CLEMENT STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2015

City	State	Zip Code
BALTIMORE	MD	21230

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
FUNDRAISINGCategory/
Type

Transaction ID : SB17.I953

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. KARI SNYDER

Mailing Address 20511 BENT WILLOW RD.

City	State	Zip Code
ROHRERSVILLE	MD	21779

Purpose of Disbursement
REIMBURSEMENT

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

204.94

Transaction ID : SB17.I932

PRE-PAID GAS CARDS WALMART

B. AAAA SELF STORAGE

Mailing Address 257 KEYES FERRY RD.

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
STORAGECategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.I930

c. ADP, LLC

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement
PARKING SVCCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2015

Amount of Each Disbursement this Period

87.45

Transaction ID : SB17.I1016

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

392.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		06		2015

Amount of Each Disbursement this Period

270.30

Transaction ID : SB17.I933

B. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

234.98

Transaction ID : SB17.I934

C. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Disbursement this Period

32.59

Transaction ID : SB17.I935

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

537.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN MOUNTAIN THEATER

Mailing Address 49 MARTIN ST.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		06		2015

Amount of Each Disbursement this Period

84.80

Transaction ID : SB17.I931

B. AMYWAY

Mailing Address 419 NEW JERSEY AVE. SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2015

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.I923

C. AT&T MOBILITY

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.I943

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

259.80

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AT&T MOBILITY

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 10 / 2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I948

B. BEST BUY

Mailing Address 276 RETAIL COMMONS PKWY

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 04 / 2015

Amount of Each Disbursement this Period

251.21

Transaction ID : SB17.I1011

C. BEST BUY

Mailing Address 276 RETAIL COMMONS PKWY

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 21 / 2015

Amount of Each Disbursement this Period

1744.00

Transaction ID : SB17.I1012

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2195.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. BUFFALO WILD WINGS

Mailing Address 4 NORTHRIDGE DR., SUITE 100

City	State	Zip Code
BUCKHANNON	WV	26201

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

Amount of Each Disbursement this Period

33.90

Transaction ID : SB17.I1013

B. C.J. MAGGIE'S

Mailing Address 309 DAVIS AVE.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

40.66

Transaction ID : SB17.I1014

C. CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASOPH ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FUNDRAISING EMAILS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2015

Amount of Each Disbursement this Period

1249.50

Transaction ID : SB17.I920

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1324.06

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASOPH ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FUNDRAISING EMAILS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

425.00

Transaction ID : SB17.I950

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2015

Amount of Each Disbursement this Period

67.54

Transaction ID : SB17.I1015

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

314.27

Transaction ID : SB17.I970

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

806.81

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I971

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

110.95

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I972

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
COMPLIANCE CONSULTINGCategory/
Type

Transaction ID : SB17.I973

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1158.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

109.64

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I974

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I976

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

86.40

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I977

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

446.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

49.25

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I978

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

23.25

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I979

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

54.79

Purpose of Disbursement
CREDIT CARD FEECategory/
Type

Transaction ID : SB17.I980

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

127.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
CREDIT CARD FEECategory/
Type**Transaction ID : SB17.I981**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

231.60

Purpose of Disbursement
CREDIT CARD FEECategory/
Type**Transaction ID : SB17.I982**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
CREDIT CARD FEECategory/
Type**Transaction ID : SB17.I983**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1279.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

12.50

Purpose of Disbursement
CREDIT CARD PAYMENTCategory/
Type**Transaction ID : SB17.I984**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

27.45

Purpose of Disbursement
CREDIT CARD FEECategory/
Type**Transaction ID : SB17.I985**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
COMPLIANCE CONSULTINGCategory/
Type**Transaction ID : SB17.I986**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

837.95

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. COMMUNICATIONS CORPORATION AMERICA

Mailing Address 13195 FREEDOM WAY

City	State	Zip Code
BOSTON	VA	22713

Purpose of Disbursement
LIST MANAGEMENT SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Disbursement this Period

4608.27

Transaction ID : SB17.I949

B. CUSTOMINK

Mailing Address 7902 WESTPARK DR

City	State	Zip Code
MCLEAN	VA	22102

Purpose of Disbursement
TEESHIRTS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

647.00

Transaction ID : SB17.I987

C. DOMINO'S PIZZA

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2015

Amount of Each Disbursement this Period

40.24

Transaction ID : SB17.I989

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5295.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. DOMINO'S PIZZA

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

Amount of Each Disbursement this Period

41.81

Transaction ID : SB17.I990

B. DOMINO'S PIZZA

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

41.81

Transaction ID : SB17.I991

C. EL GRAN SABOR

Mailing Address 413 KERENS AVE.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		06		2015

Amount of Each Disbursement this Period

65.04

Transaction ID : SB17.I1018

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

148.66

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

180.00

Transaction ID : SB17.I941

B. GODADDY.COM LLCMailing Address 14455 N HAYDEN RD.
STE. 226

City	State	Zip Code
SCOTTSDALE	AZ	85260

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

819.67

Transaction ID : SB17.I988

C. HARDROCK CAFE

Mailing Address 999 E ST. NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Disbursement this Period

40.84

Transaction ID : SB17.I1019

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1040.51

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN & SUITES

Mailing Address 400 2ND AVE SW

City	State	Zip Code
CHARLESTON	WV	25303

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2015

Amount of Each Disbursement this Period

199.36

Transaction ID : SB17.I1020

B. KAC-KA-PON

Mailing Address 395 E MAIN ST.

City	State	Zip Code
WARDENSVILLE	WV	26851

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2015

Amount of Each Disbursement this Period

37.70

Transaction ID : SB17.I1025

C. LA PLAZA

Mailing Address 629 PENNSYLVANIA AVE. SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Disbursement this Period

70.83

Transaction ID : SB17.I1026

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

307.89

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. LONGWORTH CAFE

Mailing Address 9TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2015

City	State	Zip Code
D.C.	DC	20515

Amount of Each Disbursement this Period

74.85

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1027

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. LONGWORTH CAFE

Mailing Address 9TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

City	State	Zip Code
D.C.	DC	20515

Amount of Each Disbursement this Period

43.35

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1028

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. LONGWORTH CAFE

Mailing Address 9TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2015

City	State	Zip Code
D.C.	DC	20515

Amount of Each Disbursement this Period

23.94

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1029

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

142.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. LONGWORTH CAFE

Mailing Address 9TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

City	State	Zip Code
D.C.	DC	20515

Amount of Each Disbursement this Period

689.56

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1030

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. LUIGIONE CATERING SEVICE

Mailing Address 13504 CLASSIC OAKS CT.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

City	State	Zip Code
MANASSAS	VA	20112

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
CATERINGCategory/
Type

Transaction ID : SB17.I947

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. NEW CHINA

Mailing Address 203 WINCHESTER AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2015

City	State	Zip Code
MARTINSBURG	WV	25401

Amount of Each Disbursement this Period

50.21

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1021

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

689.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. NEW CHINA

Mailing Address 203 WINCHESTER AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

51.44

Transaction ID : SB17.I1022

B. OFFICEMAX

Mailing Address 745 FOXCROFT AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

Amount of Each Disbursement this Period

66.55

Transaction ID : SB17.I937

C. OFFICEMAX

Mailing Address 745 FOXCROFT AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Disbursement this Period

136.23

Transaction ID : SB17.I955

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

254.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. OFFICEMAX

Mailing Address 745 FOXCROFT AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

1470.00

Transaction ID : SB17.I992

B. OFFICEMAX

Mailing Address 745 FOXCROFT AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

424.00

Transaction ID : SB17.I993

C. OFFICEMAX

Mailing Address 745 FOXCROFT AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2015

Amount of Each Disbursement this Period

71.01

Transaction ID : SB17.I994

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1965.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 98

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. ORBITZ WORLDWIDE INC.

Mailing Address 500 W. MADISON, SUITE 1000

City	State	Zip Code
CHICAGO	IL	60661

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2015

Amount of Each Disbursement this Period

146.42

Transaction ID : SB17.I995

B. PANERA

Mailing Address 72 OAK LEE DR.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

86.35

Transaction ID : SB17.I1023

C. PANERA

Mailing Address 72 OAK LEE DR.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2015

Amount of Each Disbursement this Period

26.19

Transaction ID : SB17.I1024

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

258.96

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 98

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. POLITICAL EQUITY CONSULTING

Mailing Address 3213 DUKE ST. #685

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FUNDRAISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

6566.66

Transaction ID : SB17.I925

B. PURPLE IRIS

Mailing Address 1956 WINCHESTER AVE.

City	State	Zip Code
MARTINSBURG	WV	25405

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

980.63

Transaction ID : SB17.I951

C. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2015

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.I1017

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7597.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Disbursement this Period

79.89

Transaction ID : SB17.I961

B. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.I962

C. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2015

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I963

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

79.89

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2015

Amount of Each Disbursement this Period

27.52

Transaction ID : SB17.I964

B. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

30.80

Transaction ID : SB17.I965

C. SHELL

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

Amount of Each Disbursement this Period

38.00

Transaction ID : SB17.I966

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

96.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

564.71

Transaction ID : SB17.I1001

B. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

819.20

Transaction ID : SB17.I1002

C. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

29.67

Transaction ID : SB17.I1003

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1413.58

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2015

Amount of Each Disbursement this Period

336.93

Transaction ID : SB17.I926

B. STAPLES

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2015

Amount of Each Disbursement this Period

105.99

Transaction ID : SB17.I936

C. STAPLES

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

889.16

Transaction ID : SB17.I996

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1332.08

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2015

Amount of Each Disbursement this Period

528.81

Transaction ID : SB17.I997

B. STAPLES

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2015

Amount of Each Disbursement this Period

821.48

Transaction ID : SB17.I998

C. STAPLES

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

254.38

Transaction ID : SB17.I999

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1604.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 98

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. THE CANNON GROUP LLCMailing Address 1001 PENNSYLVANIA AVE. NW
SUITE 1300 N

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FUNDRAISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2015

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.I952

B. UNITED AIRLINES

Mailing Address 233 S. WACKER DR.

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2015

Amount of Each Disbursement this Period

246.20

Transaction ID : SB17.I1007

c. USPS

Mailing Address 1355 COURTHOUSE DR

City MARTINSBURG State WV Zip Code 21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2015

Amount of Each Disbursement this Period

1470.00

Transaction ID : SB17.I927

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5716.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 98

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 24 / 2015

Amount of Each Disbursement this Period

980.00

Transaction ID : SB17.I928

B. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 11 / 2015

Amount of Each Disbursement this Period

3920.00

Transaction ID : SB17.I938

c. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 24 / 2015

Amount of Each Disbursement this Period

245.00

Transaction ID : SB17.I956

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5145.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address PO BOX 4003

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2015

City	State	Zip Code
ACWORTH	GA	30101

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
UTILITIES

Transaction ID : SB17.I942

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2015

City	State	Zip Code
RANSON	WV	25438

Amount of Each Disbursement this Period

60.00

Purpose of Disbursement
TRAVEL

Transaction ID : SB17.I1008

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2015

City	State	Zip Code
RANSON	WV	25438

Amount of Each Disbursement this Period

51.00

Purpose of Disbursement
TRAVEL

Transaction ID : SB17.I1009

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

411.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input checked="" type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST ST. SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2015

Amount of Each Disbursement this Period

\$	8600.00
----	---------

Transaction ID : SB18.I946

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

\$	
----	--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

\$	
----	--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

\$	8600.00
----	---------

\$	8600.00
----	---------

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 98 OF 98

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mooney for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Conquest Communication

Nature of Debt (Purpose):

Voter ID

Mailing Address 2812 Emerywood Pky Ste. 103

City State

Zip Code

Richmond

VA

23294

Outstanding Balance Beginning This Period

25934.00

Transaction ID : 0002

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25934.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ►

25934.00

2) **TOTALS** This Period (last page this line number only) ►

25934.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

25934.00